

ALASKA PIONEER HOME		P&P No: 07.08
Title: Medication Business		Approval: D. COTE
Key Words: Return, Restock, Dispensing error, Prescription confirmation		
Team: Pharmacy, Nursing	Effective Date: 1/1/11	Page: 1 of 5

PURPOSE

Return and restock of medications to the Alaska Pioneer Home (APH) Pharmacy are explained.

Medication dispensing error and pharmacy questions for the prescriber are described.

POLICY

APH staff notifies the APH Pharmacy when a resident is discharged or passes away.

APH Pharmacy credits medications that are returned in usable condition.

A medication dispensing error is promptly reported and documented for quality assurance.

APH Pharmacy contacts a prescriber with questions or concerns about a resident's medication order. If the pharmacist believes that a medication order needs to be changed, the contact is made before dispensing the medication.

DEFINITIONS

PROCEDURE

I. Medications of Discharged Resident

- A.** Pharmacy is notified by email or fax when a resident is discharged or passes away.
- B.** APH staff returns remaining resident medications to the pharmacy or destroys them.
- C.** Pharmacy stops preparing the medications and charges.
- D.** Pharmacy credits the resident for medications that are:
 1. Returned within seven (7) days, *and*
 2. Reusable.

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II. Medication Restocking and Credit or Destruction

A. Pharmacy restock of medications

1. Pharmacy limits medication return and restock to unit dose tablets, capsules, and injectables that are packaged in:
 - a) Blister cards, or
 - b) Uniform, sealed package.
2. Pharmacy staff examines returned medications to assure quality and suitability for restock and credit.
 - a) Pharmacist determines whether to restock medications in blister cards or unopened bulk containers.
 - b) Medications in the original blister card without doses removed are restocked.
 - c) Blister cards that are partially used are repackaged by the pharmacy staff, as follows:
 - (1) New blister card is used, and
 - (2) Lot number and expiration date are transferred to the back of the new card.

B. Resident credit for returned medications

1. APH pharmacist determines whether to credit a resident's account for a returned medication.
 - a) Medications are not credited if the quantity is insufficient for repackaging.
 - b) Medications are credited within 30 days of dispensing if they are acceptable for restocking.
 - (1) Medications that are special ordered for the resident are not credited.
 - c) Pharmacist determines the resident's:
 - (1) Billing status,
 - (2) Insurance coverage, and
 - (3) Other factors.
2. APH staff informs the pharmacist if the returned medication is:
 - a) Requested, dispensed, or ordered in error,
 - b) Discontinued by the prescriber,
 - c) Not needed by the resident at the time it is received, or
 - d) Appears to be in usable condition.

C. Destruction of medication

1. APH staff destroys medication that is:
 - a) Outdated,

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- b) Damaged,
- c) Not fit for pharmacy return,
- d) No longer needed by the resident,
- e) Liquid in opened bottles,
- f) Inhalers that are not sealed, or
- g) Any medication that is not sealed.
- 2. Medications are disposed in the Home's medical waste box.
 - a) Any quantity or quality of controlled substances is returned to pharmacy for disposal.

III. Medication Dispensing Errors

- A. APH staff immediately reports a medication dispensing error to the on-duty nurse.
 - 1. The nurse protects the resident's safety and welfare when the medication was given to a resident in error.
 - 2. The nurse reports all medication errors to the pharmacy and to the Home's quality assurance nurse.
- B. APH Pharmacy reports a medication dispensing error to the:
 - 1. Resident's physician,
 - 2. Family or responsible party, *and*
 - 3. Home Administrator.
- C. Medication dispensing errors include:
 - 1. Omission error, the failure to dispense a medication as ordered by a qualified health care professional.
 - 2. Time error, the failure to dispense a medication within a specified time period from the order or reorder.
 - a) Not applicable when unanswered clinical questions delay or prevent the medication fill.
 - 3. Drug, dose, or dosage form error.
 - 4. Label on medication is inappropriate, incorrect or inadequate.
 - 5. Preparation or packaging of medication is inappropriate or incorrect.
 - 6. Storage of medication prior to or during dispensing is inappropriate or incorrect.
 - 7. Expired or physically/chemically compromised medications.
- D. Medication dispensing error report is completed by pharmacy.
 - 1. Pharmacy acts to comply with the APH Pharmacy quality assurance and improvement program.

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IV. Pharmacy Confirmation of Prescription

- A.** APH Pharmacy reviews medication orders for:
 1. Interactions with other medications,
 2. Allergies,
 3. Dosage, and
 4. Indications for use and diagnosis.

- B.** The pharmacist phones or faxes the prescriber with questions about the medication order that is received by the APH Pharmacy.
 1. Faxes from pharmacy are sent to the Home and forwarded to the prescriber by a nurse.
 2. Faxes from the prescriber are sent to the Home and forwarded to pharmacy by a nurse.
 3. Completion of the order is expedited as quickly as possible.

- C.** The prescriber confirms the medication order with:
 1. No change
 - a) Pharmacist or nurse documents the prescriber's decision on the original order.
 - b) Pharmacist decides whether to fill the order in the APH Pharmacy or have it purchased by local acquisition.
 - (1) Pharmacist faxes the Home staff if local acquisition is appropriate.
 - (2) Local acquisition is used if the prescriber wants the medication started before the pharmacy can supply it to the resident, and it is not part of the Home's floor stock.
 2. Change
 - a) Pharmacist documents the change on the original order.
 - (1) Name of the agent in the prescriber's office who authorized the change is included.
 - (2) Pharmacy faxes a copy of the changed order to the Home staff.
 - b) Prescriber's response to a Home to clarify an order is forwarded to pharmacy.

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HISTORY OF REVISIONS

New:
Revised: 1/1/11.
Reviewed:

ATTACHMENTS